UNITED STATES BANKRUPTCY COURT

DISTRICT OF   NEW JERSEY

In re: Bed Bath & Beyond of Woodbridge Inc.

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Case No.   23-13395

Lead Case No.   23-13359

Debtor(s)

☒ Jointly Administered

Post-confirmation Report

Chapter 11

Quarter Ending Date: 12/31/2023

Petition Date: 04/23/2023

Plan Confirmed Date: 09/14/2023

Plan Effective Date: 09/29/2023

This Post-confirmation Report relates to: ⦿ Reorganized Debtor

○ Other Authorized Party or Entity: Bed Bath & Beyond of Woodbridge Inc.

Name of Authorized Party or Entity

/s/ Bradford J. Sandler

Signature of Responsible Party

Bradford J. Sandler, Esq.

Printed Name of Responsible Party

01/23/2024

Date

Pachulski Stang Ziehl & Jones LLP
780 Third Avenue, 34th Floor
New York, NY 10017-2024

Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.

Debtor's Name Bed Bath & Beyond of Woodbridge Inc.   Case No. 23-13395

Part 1: Summary of Post-confirmation Transfers

	Current Quarter	Total Since Effective Date
a. Total cash disbursements	$0	$0
b. Non-cash securities transferred	$0	$0
c. Other non-cash property transferred	$0	$0
d. Total transferred (a+b+c)	$0	$0

Part 2: Preconfirmation Professional Fees and Expenses

			Approved Current Quarter	Approved Cumulative	Paid Current Quarter	Paid Cumulative
a.	Professional fees & expenses (bankruptcy) incurred by or on behalf of the debtor	*Aggregate Total*	$0	$0	$0	$0
	Itemized Breakdown by Firm					
	Firm Name	Role				
i			$0	$0	$0	$0
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Debtor's Name Bed Bath & Beyond of Woodbridge Inc.   Case No. 23-13395

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Debtor's Name Bed Bath & Beyond of Woodbridge Inc.   Case No. 23-13395

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			Approved Current Quarter	Approved Cumulative	Paid Current Quarter	Paid Cumulative
b.	Professional fees & expenses (nonbankruptcy) incurred by or on behalf of the debtor *Aggregate Total*		$0	$0	$0	$0
	Itemized Breakdown by Firm					
	Firm Name	Role				
i			$0	$0	$0	$0
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Debtor's Name Bed Bath & Beyond of Woodbridge Inc.   Case No. 23-13395

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c.	All professional fees and expenses (debtor & committees)		$0	$0	$0	$0

Part 3: Recoveries of the Holders of Claims and Interests under Confirmed Plan

	Total Anticipated Payments Under Plan	Paid Current Quarter	Paid Cumulative	Allowed Claims	% Paid of Allowed Claims
a. Administrative claims	$0	$0	$0	$0	0%
b. Secured claims	$0	$0	$0	$0	0%
c. Priority claims	$0	$0	$0	$0	0%
d. General unsecured claims	$0	$0	$0	$0	0%
e. Equity interests	$0	$0	$0		

Part 4: Questionnaire

a. Is this a final report?   Yes ◯   No ⦿

    If yes, give date Final Decree was entered: _____

    If no, give date when the application for Final Decree is anticipated: 12/31/2024

b. Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930?   Yes ⦿   No ◯

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Privacy Act Statement

28 U.S.C. § 589b authorizes the collection of this information and provision of this information is mandatory. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6) and to otherwise evaluate whether a reorganized chapter 11 debtor is performing as anticipated under a confirmed plan. Disclosure of this information may be to a bankruptcy trustee when the information is needed to perform the trustee's duties, or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." *See* 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/ rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case, or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).

I declare under penalty of perjury that the foregoing Post-confirmation Report and its attachments, if any, are true and correct and that I have been authorized to sign this report.

/s/ Michael Goldberg   Michael Goldberg, as Plan Administrator
Signature of Responsible Party   Printed Name of Responsible Party

Solely in his capacity as Plan Administrator
Title   01/23/2024
   Date

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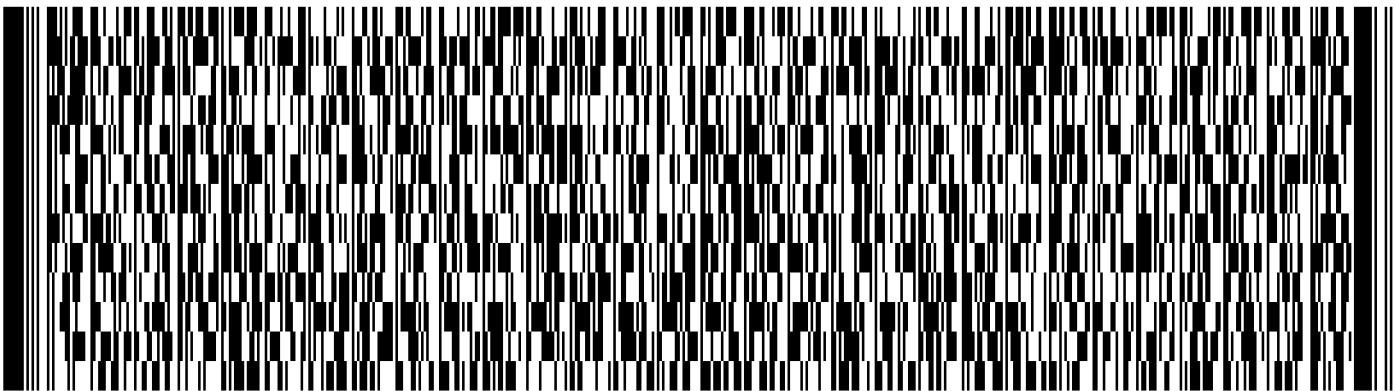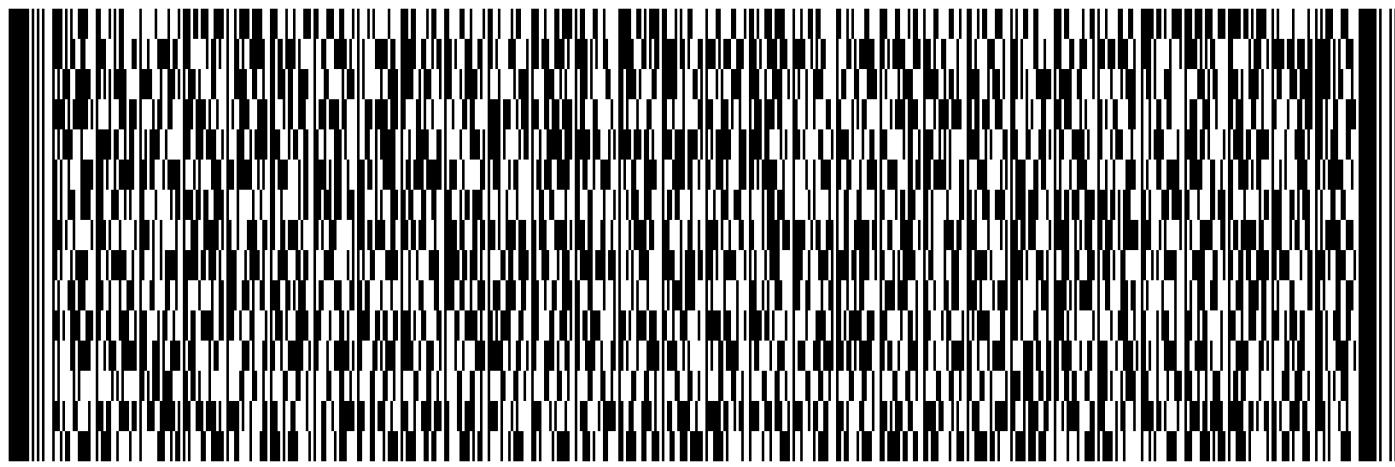
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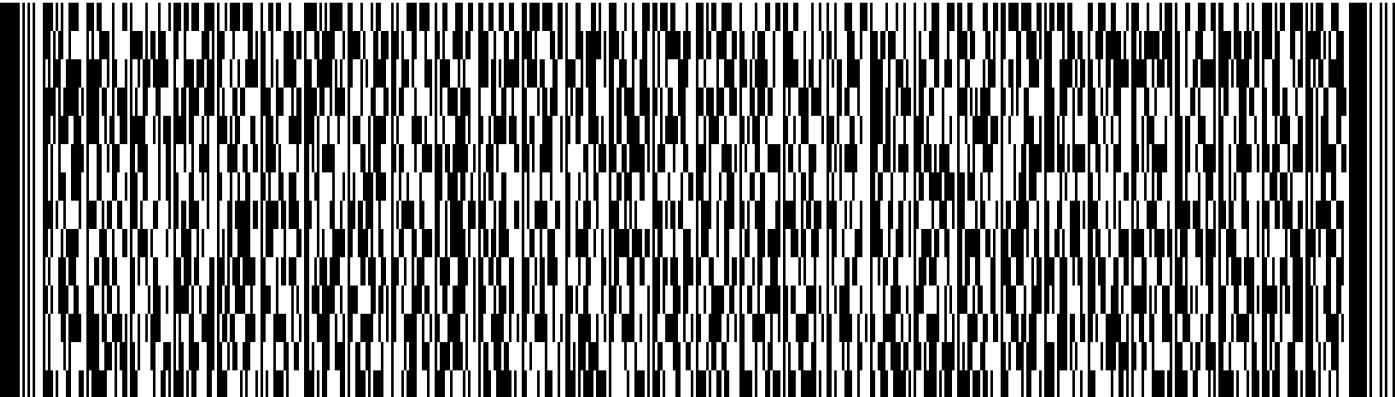
Page 2 Minus Tables

Bankruptcy Table 1-50

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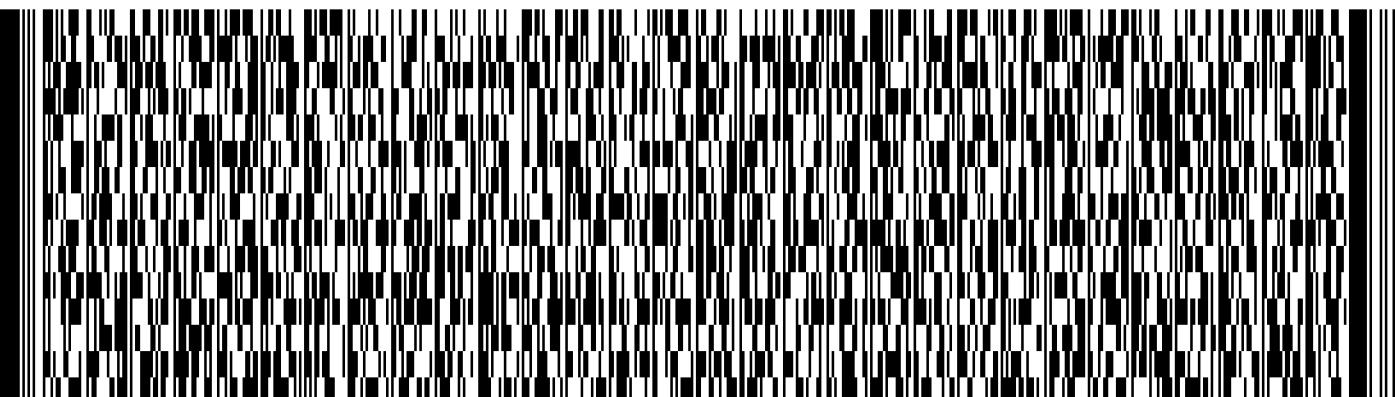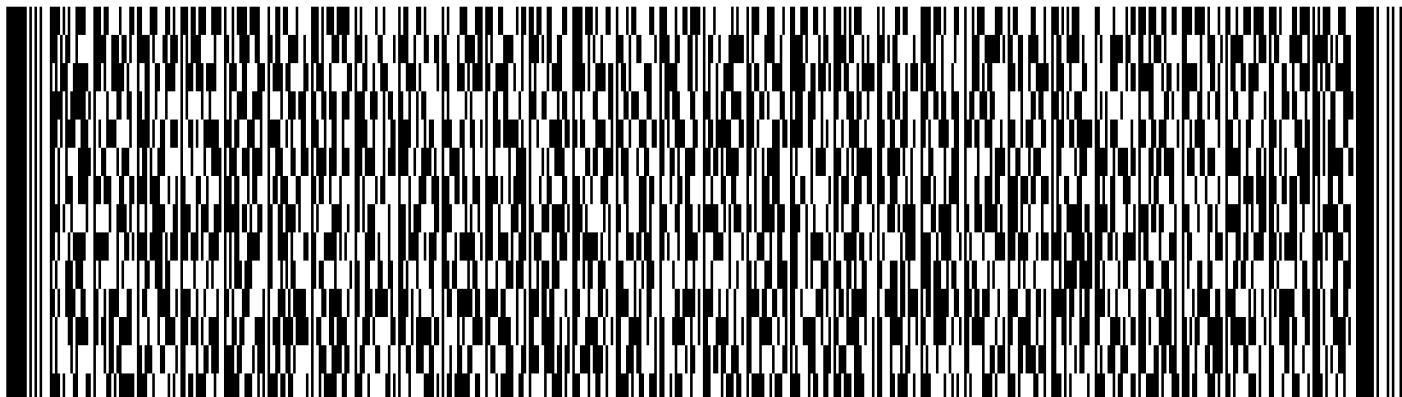
Bankruptcy Table 51-100
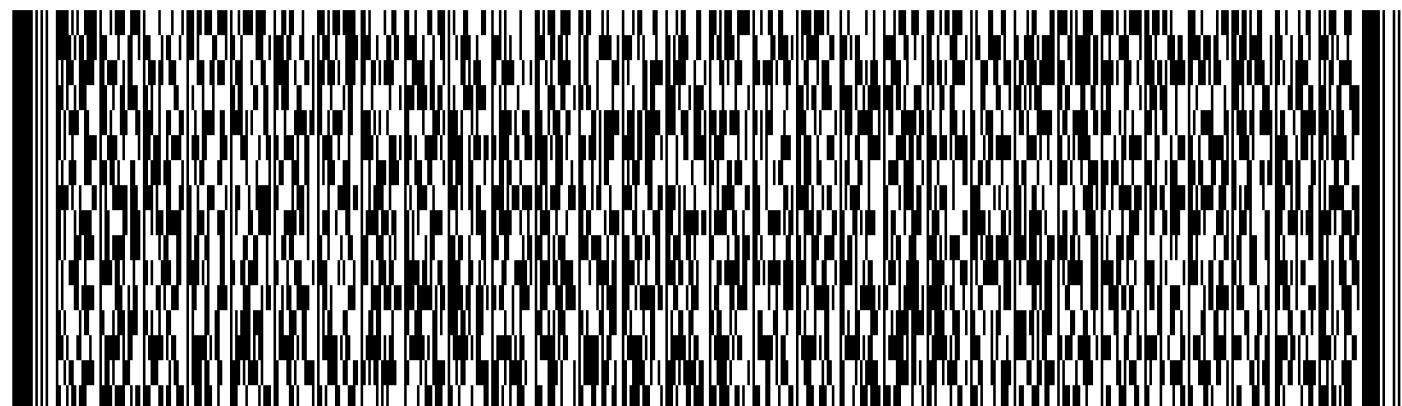
Non-Bankruptcy Table 1-50
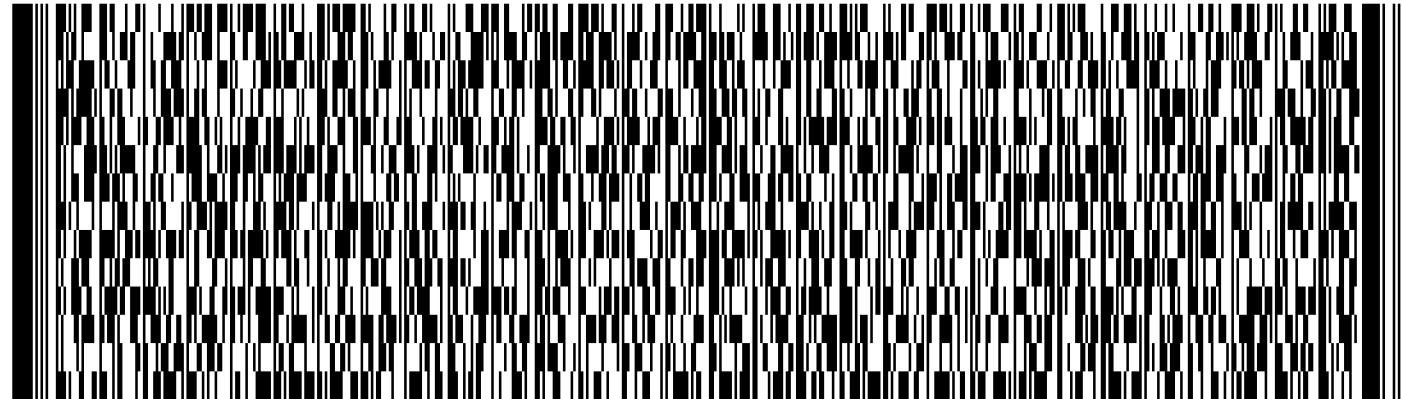
Non-Bankruptcy Table 51-100

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